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UTILITY PATENT APPLICATION		ATTORNEY DOCKET 87144NAB					
TRANSMITTAL UNDER 37 CFR 1.53(b)		.53(b)	Customer No. 01333				
Commissioner for	Patents		Express	Mail L	abel No.		
P.O. Box 1450 Alexandria, VA. 22313-1450			EV 293531857 US			S. PTO	
RADIATION IMAGE SCANNING APPARATUS AND METHOD		Date: _	mar	<u>Ch 31,200</u>	2335 U.S 10/8148		
First Named Inventor (or Application Identifier):		tifier):				N I	
Rongguang Liang							
Enclosed are:							
1. X Specification			6.		gnment of the invention	n to	
2. 13 Sheet(s) of drawing	v(s)		7. F		man Kodak Company ified copy of a priority	,	
3. X Information Disclo	sure Statement Und	ler 37 CFR	8.		ociate Power of Attorne		
	1.97.						
4. Combined Declaration fo	r Patent Application	n and Power of	Attorney:				
 4a. X New 4b. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed) 							
5. Incorporation by Reference (useable if Box 4b is 9. Deletion of Inventor(s).							
checked) The entire disclosure					t attached deleting inve		
which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying 1.33(b).							
application and is hereby incorp			1.33(b)	,.			
			-identified	application	on, amend the specifica	ition at Page 1,	
10. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, after the title, by inserting the following:CROSS REFERENCE TO RELATED APPLICATION							
				visional A	application Serial No.,		
filed, entitled.							
If a CONTINUING APPLICA		-		-			
11. Continuation Divisional Continuation-in-part (CIP) of prior application No:							
12. X Please address all written communications to Mark G. Bocchetti, Patent Legal Staff, Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201.							
Eastman Kodak Con Please Direct all tele							
		on it. Diisii ut o	705 500 27.	20.			
The filing fee has been calculate FOR:	NO. FILED	NO. EXTRA	RA	TE I	FEE	1	
BASIC FEE					\$ 770	<u> </u>	
TOTAL CLAIMS	37 - 20 =	17	x l		\$ 306		
INDEPENDENT CLAIMS	5 - 3 =	2		6 =	\$ 172		
MULTIPLE DEPENDEN	T CLAIM PRESEN	TED		+ 290	\$ 0		
				OTAL	\$ 1248	i	
X Please charge my Eastman Kodak Company Deposit Account No. <u>05-0225</u> in the amount of \$ 1248							
A duplicate copy of this sheet is enclosed							
X The Commissioner is hereby authorized to charge any additional filing fees required under							
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225</u> . A duplicate copy of this sheet is enclosed.							
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Nelson A. Blish/tmp Telephone: 585-588-2720 Facsimile: 585-477-4646

Attorney for Applicants. Registration No. 29,134